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ABSTRACT

A study investigated characteristics of retirees and types of voluntary groups they joined after retirement. Data were collected through face-to-face interviews and completed questionnaires of 206 Australians over age 50. Five categories of voluntary organizations were studied: intellectually challenging, sporting/exercise, social, helping others, and hobby clubs. Data indicated joining groups was influenced by gender, age cohort, level of education, past employment, health status, and familial status. Males were more likely to join sporting groups, and slightly more likely to join groups for intellectual challenge and to be of help to others. Females were more likely to join for social contact and to pursue hobbies. Increasing age led to an overall decreasing tendency to belong to groups, and membership of groups for social purposes increased with age. Those with higher levels of education were likely to join groups offering intellectual challenge and "helping others" activities; those with lower levels tended to take part in more passive activities; and hobby and craft groups attracted people from all educational backgrounds. Participants from white-collar occupational backgrounds had a higher tendency to join groups, and those who joined clubs to help others were predominantly from these backgrounds. Health status did not affect membership, except among older seniors. For older adults who lived alone, social contact may have been a major incentive to join. (Appendixes contain 24 references, 13 charts, and the instrument.) (YLB)

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VOLUNTARY GROUP PARTICIPATION BY THIRD AGE AUSTRALIANS

Dr Claire Mayhew and Dr Rick Swindell

Griffith University

April 1996

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Coopers Plains Senior Citizens	Mr Terry Moo (President)
	Mrs Irene Niebling (Vice-president)
	Mr Norm Niebling (Treasurer)
Crosby Park Meals on Wheels	Ms Leona Hayman (Administrator)
Genealogical Society of Queensland	Ms Gillian Arnot Smith (President)
	Ms Beryl Murton (Library Supervisor)
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Golden Years Centre	Mr Tino Babao (Manager)
	Ms Pamela Reid (Welfare Officer)
Queensland Contract Bridge Club	Mrs Claire Hyne (President)
	Mrs Marion Cooke (Manager)
Queensland Council of Garden Clubs	Mrs Bernice Brown (President)
Royal Historical Society of Queensland	Dr Ruth Kerr (President)
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Dr Rick Swindell
Griffith University

April 1996

EXECUTIVE SUMMARY

This project set out from "grounded theory" to begin to explain the role that voluntary groups play in the lives of Third Age Australians. Data collection was based upon face to face interviewing of 206 retired, Third Age Australians, all of whom also completed a questionnaire. These interviews were performed by five Research Assistants, who were themselves retired from the paid work force. Analysis of the survey data provides a stephold towards the understanding of voluntary groups and their possible influences on the quality of life of older adults as well as pointing the way for future research.

From the data gathered we propose that:

The predominant reason older people join voluntary groups is for social contact, however social contact of itself is not usually a sufficient reason. Organisations attract members with different characteristics to different activities. Joining voluntary groups appears to be influenced by gender, age cohort, level of education, past employment, health status and familial status.

The differences by gender were:

- males were more likely than females to join sporting groups, were slightly more likely to join groups for intellectual challenge, and to be of help to others; and
- females were more likely than males to join voluntary groups for social contact purposes and to pursue hobby activities.

The differences by age cohort were:

- there was an overall decreasing tendency to belong to voluntary groups with increasing age;
- membership of voluntary groups for social purposes increased with age;
- age did not appear to have an effect on the membership of "helping others" activities until the age of 80 years plus, when there was decreased involvement; and
- the youngest surveyed age group (50-59 years) were more interested in hobby activities and exercise (sporting) activities.

The differences by levels of education were:

- third agers with higher levels of education were more likely to join groups which offered intellectual challenge and "helping others" activities;
- those with lower levels of formal education tended to take part in more passive activities such as those offered by senior citizens groups, or where social activities dominated;
- hobby and craft groups attracted people from all educational backgrounds although those with trade certificates were less interested; and
- only sporting groups were relatively homogeneous in terms of levels of education of members.

The differences by past employment patterns were:

- except for voluntary groups involving social activities, those participants from "white collar" occupational backgrounds had a higher tendency to join voluntary groups than did those from a "blue collar" or "home maker" background.
- those who joined clubs to "help others" were predominantly from "white collar" occupational backgrounds (this held for both males and females); and
- women and men who had retired from the paid labour force appeared to have a greater tendency to join a voluntary group than did home makers.

The difference by health status was:

- health status did not affect membership of voluntary groups, except amongst older seniors.

The difference by familial status was:

- for third agers who lived alone, social contact within the group may have been a major incentive to join.

Overall, members of voluntary groups tended to be well satisfied and committed to their organisations of choice, and often spent a large part of their time in group activities. Successful groups tended to have a large number of members who were both "givers" and "getters", that is, they assisted the group as well as taking part in group activities.

The data also indicated that successive cohorts of Third Age Australians are interested in joining different types of groups, although it would appear that some organisations may have to change their direction if they are to remain viable for existing members, or hope to attract new members. Those organisations which do not adapt their activities to "match" the evolving interests of existing and potential members in their catchment areas, are likely to decline.

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1.0 BACKGROUND TO THE STUDY

Despite the persistence of misinformation about the adverse economic and social consequences of population ageing (Minkler & Robertson, 1991), it is clear that the majority of older people are well and capable of maintaining a full life within the community (Jones, 1992; Laslett, 1989). Current ageing policy also emphasises the need to understand factors which maintain well-being, health and independence in later life (DHH&CS, 1991).

Gibson and Mugford (1986), in one of the detailed analyses conducted within the Ageing and Families study (Kendig, 1986), showed statistically significant associations between organisational membership and positive morale scores amongst older people. They also found that participants of voluntary groups were less likely to say they were lonely than others who had not recently visited voluntary groups. Similarly, Riggs and Mott (1992) also found that activities and personal interaction contributed greatly to increased satisfaction among older Australians. It is possible, therefore, that clubs or seniors groups may be particularly helpful for older people, particularly those who have experienced disruption of social networks through retirement, family break-up, or the death of a partner or close friend which jeopardises their capacity for independent activity. The "grassroots level" of interest in voluntary groups, particularly that shown by the healthy ageing, suggests that these groups are filling important quality-of-life needs. However, successive ageing cohorts are changing rapidly and have quite different sets of life experiences and expectations. These changes have caused Kendig and McCallum (1990) to question the appropriateness of existing services, many of which may no longer meet present needs, let alone those of future cohorts. They called for the development of new services and approaches which have the capacity to meet rapidly evolving needs. One such approach could lie in the enhancement of access to voluntary organisations for older people, some of which are growing rapidly in popularity with little or no financial support (James and Swindell, 1992; Swindell, 1992).

Although a number of studies have treated group membership as an outcome variable, few studies have been undertaken in which "belonging" is the starting point of investigation. Yet, voluntary organisations may be able to facilitate health and well-being of older participants. For example, exercise can delay or reverse physical ageing (Emery & Blumenthal, 1990). Consequently, groups like bowls, golf and tennis clubs could appeal to increasing numbers of the young ageing who understand the benefits of sensible exercise in later life.

Recent studies suggest that it may also be possible for older adults to improve, or at least maintain their health through intellectual stimulation. In reviewing evidence which indicates that education may protect against dementia, Orrell and Sahakian (1995) suggested that adult education programs and stimulating mental activity may help in the development of coping skills and strategies for solving problems. In turn these may help to offset the cognitive effects of normal ageing and delay the clinical symptoms associated with diseases such as Alzheimer's. This would be of significant economic importance. Katzman (1995) observed that the economic cost of caring for demented older persons in the United States is over 100 billion dollars a year and that a 5-year delay in the onset of symptoms would halve the number of dementia patients. He suggested that the discovery of activities that delay the onset of dementia would likely have the same consequences as the discovery that diet and exercise delayed the onset of cardiovascular disease in older individuals. He further speculated that if engagement in specific social or leisure activities in late life is found to delay the onset of dementia, there would be a reasonable biological basis for this. By exposing rodents to stimulating environments, an increase in their brain weight and cognition has been observed. Additional support for the sound mind-sound body aphorism

perhaps may be drawn from data from the 14-year National Long Term Care Survey to be released in early 1996 (Cohen, 1996). For example, better-educated women in the USA, where the study was carried out, are likely to live some seven years longer than their less-educated counterparts. Reasons for this link are subject to speculation. However, if indeed late life mental stimulation is linked to the health and well-being of participants, groups like the University of The Third Age (U3A), which are predominantly concerned with intellectual challenge in later life and which have proliferated internationally in the past few years (Swindell and Thompson, 1995), could play an important role in helping older participants to maintain their independence as well as enhancing their quality of life.

Additional to the foregoing intriguing suggestions that physical and mental stimulation are linked to late life health and well-being, a consistent inverse relationship between social support and mortality and morbidity has also been found (Cohen & Syme, 1985) although, once again, the causal variables are not well understood. Therefore, organisations such as senior citizens clubs, which were established to provide social contact, may be helping to maintain aspects of participants' quality of life through social support.

However, the appropriateness of some organisations and activities designed to improve older adults' well-being has been challenged. Gayfer (1985) noted the inappropriateness of leisure-time programs of a patronising nature, which were irrelevant to the lives of older people. Further, Gibson's (1986) study showed that membership of a social network alone was not related to well-being. As a result she questioned expensive interventions which were intended to increase social contact for its own sake. Krout, Cutler and Coward (1990) also criticised some seniors' centres for their failure to attract groups of vulnerable seniors such as those from minority, low income and frail elderly backgrounds.

Little is known about the characteristics of voluntary groups, let alone their effect on well-being. One review of the literature relating to seniors' centres in the USA (Ralston, 1991) suggested that the focus of many studies was on the relatively superficial question of who participants were. More fundamental questions such as why certain people joined specific groups, why others did not, what participants found valuable, and how perceived or actual barriers to participation can be removed, appear not to have been addressed. In a preliminary study of senior Australians who joined voluntary organisations, James and Swindell (1992) observed strong social contact needs common to a range of totally different groups. Even amongst organisations which appeared to have another obvious primary function (such as intellectual challenge, sport, or helping others), a desire to meet stimulating people was often perceived to be as important as, or more important than, the primary function of the group itself. Using this knowledge James and Swindell (1992) developed for a group of housebound frail elderly people, an activity which involved intellectual challenge provided by teleconferencing. A number of qualitative and quantitative improvements in participants' quality-of-life were observed, although the specific transactions which produced the improved well-being could not be unequivocally identified. Results suggested that even the vulnerable ill older voluntary group members may benefit from group activities which are perceived by them to be worthwhile (Swindell and Mayhew, 1996).

Our rapidly ageing population and a concomitant decline in the number of adults in the paid work force presents a growing dilemma for those concerned about resource allocation for the needy in a just and caring society. A recent issue of the journal Ageing and Society was devoted to the theme of "resource allocation and societal responses to old age". In the introduction to this issue Callahan, Ter Meulen and Topinkova (1995) observed that simply to maintain the level of services available in 1990 would entail an increase of 10 to 15 per cent in resources for home and institutional care. They described this as an intimidating figure in the face of public and political pressures to hold down, or cut back on, health and welfare spending in all countries.

The issue of allocating declining resources to the needy has the potential to become socially divisive. In their scathing analysis of the tendency by some groups to blame the old for the poverty and hardship faced by other would-be recipients of welfare support, Minkler and Robertson (1991) highlight the damaging nature of thoughtless or simplistic catch-all explanations for a complex societal problem. Undoubtedly, new ways of "cutting the cake" will need to be considered and these could impact adversely on some ageing groups. Before change occurs, however, it is important for policy makers to understand how effectively existing services are meeting needs and whether these services have the potential to meet the needs of newer ageing cohorts.

The role and impact of voluntary groups in the lives of older people is an example of a community service which is not well understood. Voluntary groups are a widely accepted part of our culture and, clearly, they are important to many older people. Moreover, many voluntary groups are largely, or totally, self-funding. As such they could play an important role in the mix of services envisaged for future cohorts of healthy ageing people. However, their actual and potential value to older people needs to be seriously examined and evaluated. For example, if it can be demonstrated that voluntary groups have a positive impact on participants' well-being, it may be a highly effective and relatively inexpensive move to promote the advantages of belonging to a group, in much the same way that public education campaigns have convinced many older people of the advantages of sensible diet, moderate exercise and giving up smoking.

The study outlined in this report was designed to begin the process of understanding the characteristics of voluntary groups which older Australians join, and of participants' traits, as well as the influence and impact of these groups on the everyday lives of Third Age Australians.

2.0 METHODOLOGY

This study set out from a "grounded theory" exploration, to begin to explain the role that voluntary groups play in the lives of countless Third Age Australians.

Inductive research is based upon "grounded research" methodology. With "new" areas of study, the theoretical paradigm or hypothesis is, at first, unknown. Therefore, field work and data gathering are carried out to establish background information on the topic. This process is often called "inductive" research. Once this preliminary phase has been completed and the parameters of the research area have been established in some basic framework, the basic research questions or areas to be studied can be investigated (see Neuman, 1994). After the data have been gathered, the hypothesis or general statement of aims can then be stated. Future research may test the hypothesis in a more traditional "scientific" or "deductive" manner.

In this study, exploratory interviews were designed to shed light on the general characteristics of groups in a standard inductive process. Office bearers and participants from a variety of clubs and organisations for older people took part in these exploratory interviews to establish the parameters of the research project. Subsequently, a questionnaire was designed, pilot tested, and administered by face-to-face interviews with 206 seniors who belonged to one or more clubs or organisations.

This detailed questionnaire attempted to gain information on the reasons why senior Australians joined voluntary groups or organisations, why certain groups were chosen and not others, what the perceived costs and benefits were, and, to a limited extent, any differences between sub-groups of the retired population and their preferences for activities. The clubs or organisations were chosen from five predetermined categories namely: intellectually challenging; sporting; helping others; social; and craft/hobby groups.

Five research assistants, who were also third agers, were trained to administer the questionnaires. They were intentionally recruited from the same general age group in order to enhance their acceptability amongst the population under study. The detailed process is described below.

2.1 THE EXPLORATORY INTERVIEWS

During early March 1994 a number of introductory interviews were held with office bearers of clubs or organisations whose principal activities fell within one or more of five predetermined major categories. These categories were:

- intellectual challenge (e.g., historical society, genealogical society, bridge clubs);
- sporting or exercise (e.g., bowls clubs, aquarobics);
- helping others (e.g., Meals on Wheels);
- predominantly social (e.g., Senior Citizens); and,
- hobby or craft (e.g., gardening clubs, railway society etc.).

Politically oriented groups, professional associations and religious groups were not included unless they also provided activities which fell within the above categories and were open to the wider ageing population.

These introductory interviews served a number of purposes. First, they provided the opportunity for the chief investigators to meet with organisational representatives and establish the legitimacy of the project; second they provided insights into the characteristics

of specific clubs from the administrators' viewpoints; and, third, they enabled access to future interviewees (see Acknowledgements) A total of 29 initial background interviews were held during March,1994 with participants from the groups shown in Table 1. The interviews lasted between 30 and 45 minutes each.

Table 1: Categories and groups involved in exploratory interviews

Focus of Organisation		Gender	
		Male	Female
Intellectual Challenge (Qld Historical Society)		2	2
Sporting Activities (Aquarobics at Yeronga Park)		-	2
Helping Others (Holland Park Meals-on-Wheels)		3	3
Social Activity (Probus)		2	2
Combined (Wynnum 50's and Over Leisure Centre)	**Craft**	-	3
	Choir	-	4
	Table tennis	3	2
	Administration	-	1
Total = 29		10	19

The exploratory interviews were intended to provide as wide a perspective as possible of the types of activities and purposes of the various groups. A number of key areas were canvassed including: which groups these people belonged to; why they chose these groups and activities and not others; how many groups they belonged to; how long they had been involved in these types of activities; why they believed people preferred not to join groups and activities; and why there may be differences in the demand for different types of activities between males and females. Immediately following the interviews, detailed transcripts were written to aid recall of key points and issues.

2.2 RESEARCH ASSISTANT SELECTION AND TRAINING

At the outset we had decided to recruit older Research Assistants (RAs) for this project. The rationale behind this decision was that older people feel more at ease, are more likely to confide, and are less likely to distort comments when they deal with people from a similar age cohort. That is, we believed that higher quality data would result if we hired older rather than younger interviewees for the data gathering process.

An advertisement calling for retired people to train as paid, part-time RAs was placed in the January 1994 newsletter of the Brisbane University of the Third Age. Applicants were required to have a tertiary qualification, good interpersonal skills, interviewing experience, as well as being able to drive their own car. Twenty-three applications from highly skilled, well qualified and very talented people were received; five female RAs in the age range 63 to 67 were selected after interviews. They were paid standard research assistant hourly rates, plus a loading for use of their cars.

The RAs attended three training sessions. The first, which included an overview of the research proposal and an introduction to ethnomethodological research methods was held in early March, 1994. The second session at the end of March included ethnomethodological role play experiences and a trial of the instrument. The third was held 5 weeks later when 25 pilot-tested questionnaires were reviewed.

2.3 QUESTIONNAIRE DEVELOPMENT AND PILOT TESTING

The field notes from the exploratory interviews were transcribed and a questionnaire was developed which incorporated the central issues identified by the participants.

In the 5 weeks between their second and third training sessions, the RAs each pilot-tested 5 questionnaires (a total of 25 questionnaires) with members of the organisations shown in Table 1. None of the 25 members who completed a pilot questionnaire had taken part in the exploratory interviews. Following minor amendments to the questionnaire, the RAs were then allocated to a range of organisations whose members were to complete the fully developed questionnaire (see Appendix 2).

2.4 SAMPLE SELECTION PROCESS

Confidentiality of membership records prevented our taking control over the sample selection process and we were, therefore, unable to select participants randomly in all organisations. In larger organisations attempts were made by some organisers to minimise volunteer bias. For example, in the Yeronga Bowls Cub, separate alphabetically-ordered membership lists were held for males and females; we requested 15 participants from each list, with every fifth person on the lists selected. However, in most organisations, the recruiting method for participants in this research project involved office bearers speaking to the membership about the aims of the study. Subsequently, members who were prepared to be interviewed listed their names and phone numbers and the lists were then given to the RAs for follow up. The possibility of volunteer bias exists with this method. In one bridge club and one senior citizens' club the RAs themselves were asked to explain the project to the assembled members and those who were interested wrote their names on a list to be later interviewed. (One of the benefits of using older RAs in this way came to light during follow up interviews when a number of interviewees, particularly from the senior citizens clubs, indicated that they would not have volunteered had the interviews been conducted by "younger people".) We believe invasion of privacy, and the possible fear of personal violence associated with allowing strangers to learn too much about their personal circumstances, are normally very real for many older people and presents a considerable obstacle to studies of this nature.

Thus, there were both disadvantages and advantages associated with the sampling method which circumstances forced us to adopt. On the one hand only volunteers were interviewed in many organisations. On the other hand, because our older interviewers were seen to be unlikely to pose any personal threat, people volunteered who might normally have refused if approached in any other way.

2.5 THE INTERVIEWS

The interviews followed a set routine. The RAs telephoned each potential interviewee from the lists provided by participating clubs and organisations, explained the project, and arranged a meeting time and place. The voluntary nature of participation and confidentiality of responses was stressed. Each questionnaire was completed by the participant in his/her home or venue of choice, in the presence of the research assistant. The role of the research assistant was to clarify participants' responses if their written answers were not clear, or to write answers in the participants' own words if they were unable or disinclined to complete the lengthy questionnaire. Each interview lasted about one hour. A total of 206 interviews were managed in this way by the five RAs. The distribution of interviewees, according to a variety of demographic and group characteristics is discussed in detail in sections 4.1 and 4.2 of this report.

3.0 INTERVIEWS WITH CLUB OFFICIALS

The personal interviews with administrators and experienced members conducted at the beginning of this study provided considerable insights into the operation of the five major categories of voluntary organisations studied in this project, namely; intellectually challenging, sporting/exercise, social, helping others, and hobby clubs. In a number of cases the administrators had held voluntary administrative positions in the organisations for more than 10 years, and some spent more than 20 unpaid hours a week in running the organisation. {Some of the characteristics of group members, and of the different types of activities, in each category of voluntary group is discussed in turn below.}

Social clubs

Most officials indicated that membership of clubs with a social focus had been in substantial decline for several years. Poker machines, which were legalised in Queensland in the 1980s, were reported to have had a very serious impact on the membership of former and existing senior citizens clubs. Many organisations which operate poker machines, go out of their way to attract senior citizens by providing subsidised food and transport.

Apart from declining membership, most social clubs appeared to have too few members who were prepared to do the voluntary work necessary to keep the club viable. Currently, the majority of these organisations function largely because of a sense of commitment by a small number of office bearers, some of whom have been in office for many years. Office bearers from several of these clubs feared the organisation would not survive if they resigned. One reported that she had wanted to resign for several years but no one was prepared to take her place. Other administrators reported that the only way they could keep members interested was by running special, subsidised functions. As one administrator observed "people come out of the woodwork when we have a subsidised function such as a Christmas party; the rest of the time we never see them. We try to run concerts and other events which used to interest them but now they can't be bothered."

However, a number of social clubs have apparently adapted to changing interests of members and have set out to attract members from a different segment of the Third Age population. For example, one former senior citizens club responded to declining interest by the old-old membership by changing its name and focus to "present an image of the nineties" to younger retired peel. The club employed a manager who vigorously promoted a range of activities with an exercise/fitness theme, such as walking for pleasure, tai chi, and country line dancing. Salary costs were met in part by a HACC grant and, in part, by membership charges. Line dancing had proven to be extremely popular at the club, because it was both physically and mentally demanding, and could be enjoyed by men and women of all ages. Unlike some of the clubs which had decided to cut back on opening hours because of declining interest, this club was currently involved with activities five days a week. Because it was located near good public transport, its members came from local as well as distant suburbs. The changing club focus has probably disadvantaged some former members who wanted to pursue interests such as crochet and knitting, even though there reportedly had been "a mass exodus from these classes". The club continued to offer some of its former activities like card groups, but only two or three people took part. In contrast, when exercise was offered, 20-30 people took part in these classes. Some of the original members had adapted well to the changed emphasis and renewed sense of vitality in the club. For example, the oldest member was 94 and still very active, and she attended every day of the week. However, she reportedly was at a loss during weekends when the club was closed because she became depressed and bored.

Another large former senior citizens group was also adapting to changing demography and members' interests. A full time administrator runs the club although, unlike the administrator in the previous example, he is unpaid. The club is heavily reliant on volunteers and appeared to have little difficulty in attracting these. More than 150 members, most of them women, carry out the voluntary activities which keep the club running from week to week. Many had been volunteers for almost 20 years. This club offers a very wide range of activities, including the traditional ones from the nineteen seventies, as well as newer activities with an exercise focus which cater to growing interests. The club has changed its name from a senior citizens club to one which is more inclusive of the Third Age population, and is making a determined effort to attract pre-retired people. The administrator reported that, during the eighties, the club was "abuzz" with activity, but the recession and the introduction of poker machines to a nearby RSL club, where players can also get cheap meals, had "killed a lot of interest". Despite this, more than 1000 people pass through the doors each week to take part in club activities, although this number is made up of many people who visit several times a week.

In summary, comments from social group administrators led us to believe that traditional senior citizens clubs may well be forced to change the focus of their group in ways similar to the two examples outlined above, if they are to remain viable.

Sporting groups

The following example serves to illustrate the change in focus which have been forced on a number of sporting clubs. One official of a large bowls club on Brisbane's north side suggested that the tightening of Queensland's drink driving laws had resulted in a fall off amongst male members, who used to socialise at the club. His comments applied particularly to business men who formerly joined the club for business reasons and tended to retain their membership after retirement. On the positive side, however, the club had compensated for falling male membership by increasing the number of days allocated to women's competitions, and this had resulted in an increase in female membership. He hoped that younger people might be attracted to bowls clubs by a recent move to introduce junior bowls as a school sport. These types of comments were reiterated by a number of different sporting group administrators we interviewed. The "traditional" membership base is changing and the clubs will have to become more innovative in their efforts to attract new members.

Helping others groups

"Helping others" groups, like Meals on Wheels, are facing considerable difficulties. According to one administrator all Meals on Wheels groups are "struggling for volunteers because older people are not volunteering as they did in the past, and many younger women are currently in paid employment". The organisations have tried advertising in the local newspaper and by letter box drop, but these methods have been ineffective. Currently, drivers are paid to deliver meals, and there may be an increasing need to pay other staff if governments wish to continue to rely on this form of social service. In all of the voluntary "helping others" groups surveyed during the exploratory stage of this project, similar difficulties in attracting was stressed.

Hobbies and Intellectually challenging groups

Hobbies clubs and intellectually challenging clubs presented a different picture from that of social clubs, "helping others" organisations, and, to some extent, sporting clubs. These clubs were not as concerned about falling membership. Indeed, some of the newer clubs, like U3A, have such rapidly growing memberships that many are finding difficulty in providing a sufficiently large range of intellectually challenging opportunities for their

members. Similarly, gardening clubs have proliferated in order to cater for the diverse gardening interests of many older people.

Hobby and intellectually challenging groups appeared to be different from social groups in that they catered for a specific interest. It seems reasonable to speculate that most members of a bridge club, chess club, gardening club, model railway society, genealogical society, historical society, and so forth, presumably joined because of a specific interest rather than because they wanted to meet people. Having said this, however, reasons for joining may not be as logically straight forward. For example, one administrator of an intellectually challenging group observed "I don't know why some people belong. Year after year they renew their membership but never seem to get anything tangible from it. Obviously they are getting something out of the organisation but I don't know what it is."

Later in this report it will be shown that members from all five categories of clubs (intellectually challenging, sporting/exercise, helping others, social, hobby) shared a characteristic of wanting to mix with (interesting) people. More than half the interviewees in this study listed social contact as one of their main reasons for belonging.

In summary, the background interviews provided us with sufficient information about the varying characteristics of the membership, and of the strengths and challenges facing their voluntary organisations, to develop the detailed questionnaire. The detailed data from the questionnaire appears in the next section of this report.

4.0 DATA ANALYSIS

The survey generated considerable information about many aspects of the lives of third agers and their involvement in voluntary organisations. For ease of interpretation this information has been subdivided into two major categories:

- demographic and general information about the 206 interviewees in the sample; and
- group-specific information.

4.1 DEMOGRAPHIC AND GENERAL DATA

4.1.1 Gender

Table 2: Gender

	n	%
Females	145	70.4
Males	61	29.6
Total	206	100

The majority of participants were females (n=145; 70.4%); males comprised less than one third of the sample (n=61; 29.6%). This gender imbalance had been anticipated following our preliminary study of belonging (James and Swindell, 1992). The study showed that women substantially outnumber men in most voluntary groups or clubs, the exception being sporting bowls clubs where there is a tendency for males to outnumber females.

4.1.2 Age

Participants in this study were drawn from a range of organisations where chronological age may have some bearing on choice of clubs. (Chronological age is regarded by many gerontologists as an inappropriate statistic for generalising about older people, nevertheless it is a statistic which is often required by policy makers and others concerned with resources allocation issues in later life.) For example:

- older people may have been brought up during an era when "helping others" was emphasised more than it has been subsequently and, as a result, older people may be more predisposed to belong to "helping others" groups than are younger cohorts;
- poorer health tends to be associated with older age therefore sporting clubs may be more attractive to the young-old than they are to the old-old; and,
- successive cohorts have been exposed to better educational opportunities than earlier cohorts, therefore it may be that intellectually challenging groups are more attractive to the young-old who are better educated.

For these reasons, participants were asked to locate their ages within a 10 year age range, as shown in Table 3.

Table 3: Age Ranges
(N=206)

	n	%
50 to 59 years	13	6.3
60 to 69 years	85	41.3
70 to 79 years	88	42.7
80 years plus	20	9.7

The majority of the 206 total respondents (84%) were in the 60-79 years age range with approximately equal numbers being in the 60-69 years age range (41.3%), and a similar percentage in the 70-79 years grouping (42.7%). Nearly 10% were aged 80 and over and 6.3% were in the 50-59 years group. Both these latter age groups are of interest to gerontologists. People in the 80 years plus age group comprise the fastest growing group amongst the ageing population, and considerable future emphasis may well be placed on services specifically to help the healthy oldest people in society to maximise their independence and quality of life. Changes in work patterns over the past few years also suggest that increasing numbers of people will seek early retirement, or be involuntarily retired from the workforce in their 50s. This group can expect to spend 25 or more years of life in a healthy and active Third Age (Laslett, 1989), and greater emphasis may need to be placed on increasing the range of quality of life options from which these individuals can select.

In Table 4 participants' gender and age ranges are shown.

Table 4: Gender and Age Range
(N=206)

	Total (N=206)	50-59 years (n=13)	60-69 years (n=85)	70-79 years (n=88)	Over 80 years (n=20)
Females (n=145)	70.4	84.6%	70.6 %	65.9%	80%
Males (n=61)	29.6	15.4%	29.4%	34.1%	20%

Males are under represented in all age ranges but most particularly in the youngest and oldest cohorts. The higher proportion of females to males in the 80 years plus range (f = 80%, m = 20%) is probably associated with the greater longevity of females. Census data show that from about the age of 75 years and older, females outnumber males by about 2:1. In the 50-59 year level (f = 84.6%, m = 15.4%) the ratio is possibly related to the fact that more females than males in that age range choose not to work or, if they were working, more females hold part-time or temporary positions than males, and it is these positions which may be amongst the first to be cut during business "downsizing".

4.1.3 Education Levels

Interviewees were asked to list their highest formal education levels. These details are summarised in Table 5.

Table 5: Highest Education Level
(N=206)

	number	%
Primary	62	30.1
2 year secondary	44	21.4
Full secondary	35	17.0
Trade Certificate	22	10.7
Tertiary (Associate Diploma and Degree)	36	17.5
No response	7	3.4

The largest group (30.1%) had not proceeded beyond Primary School, which was the minimum compulsory education level for most respondents when they were children. A further 21.4% had left high school after completing two years. Of the remainder,17% finished high school, 10.7% attained a trade certificate and 17.5% attained a tertiary qualification (Associate Diploma or degree). Educational levels by gender are shown in Table 6.

Table 6: Gender and Highest Education Level
(N=206)

	Primary School	Two years Secondary	Completed Secondary	Trade Certificate	Tertiary	Other
Female (n=145)	33.8%	24.1%	19.3%	6.9%	13.8%	2.1%
Male (n=61)	21.3%	14.8%	11.5%	19.7%	26.2%	6.6%

In general, it can be seen from Table 6, that males have a higher level of education than females although both men and women have lower levels of education by the standards of younger cohorts today. An explanation for both these observations lies in the societal conditions which prevailed when the respondents were children. During the post depression and World War II periods, few opportunities existed for other than children of wealthy parents to continue with their education. In addition, as some female respondents stated, "girls were not educated in my day". It was unfashionable for females to seek further education because their most likely adult role was as full-time mothers and home makers. However, about 70% of interviewees had achieved higher than primary school level, which was the minimum compulsory education level before World War II. This percentage is much greater than would have been expected from a random sample of older people. That is, the people who volunteered to be interviewed had considerably higher educational levels than the wider Third Age community. Table 7 shows the breakdown of highest education levels within the surveyed age ranges.

Table 7: Age Range and Highest Education Level
(N = 206)

	Primary School	Two years Secondary	Full Secondary	Trade Certificate	Tertiary	Other
50 - 59 years (n=13)	7.7%	46.2%	15.4%	7.7%	23.1%	0.0%
60 - 69 years (n=85)	22.4%	25.9%	20.0%	10.6%	14.1%	7.1%
70 - 79 years (n=88)	37.5%	13.6%	12.5%	13.6%	21.6%	1.1%
80 years plus (n=20)	45.0%	20.0%	25.0%	0.0%	10.0%	0.0%

Table 7 shows that, overall, there has been a general increase in the level of education over time. Participants in this study who were aged 80 years plus, received their compulsory schooling shortly after World War 1, whereas those in the 50-59 year old range received their educations perhaps 25 years later when much better opportunities and motivations for formal education prevailed. Of interest also is the high numbers of participants in the 70-79 years and the 80 years plus groups who were educated beyond the minimum level. For the majority of these interviewees, further education may have involved financial commitment by parents, perhaps reflecting other than a general working-class background. Some may also have taken part in adult education activities in later life. Volunteer bias could also have inflated these statistics. Better educated people may have been more prepared to be interviewed than those with lower education levels.

5.1.4 Health Status

Health status is likely to be a variable which impacts on whether a person joins a group or, at least, the kind of group activity chosen. Four questions were asked about respondents' health: how did they rate their overall health at the present time; how did they compare their health with other people of the same age; did their health affect what they did; and, did they have any health problems which affected their getting to groups or activities. The questions relating directly to health and involvement with groups are discussed in Section 5.2 where the focus is on group characteristics rather than on individual characteristics. In Table 8 the breakdown of self-rated health in six possible categories, by gender and age range is shown.

Table 8: Gender, Age Range and Self-Rated Health
(N=206)

	Excellent	Very Good	Good	Fair	Poor	Don't Know
Total	12.6%	26.2%	35.9%	21.4%	2.9%	1.0%
Female (n=145)	13.8%	23.4%	32.4%	24.8%	4.1%	1.4%
Male (n=61)	9.8%	32.8%	44.3%	13.1%	0.0%	0.0%
50-59 Years (n=13)	38.5%	7.7%	30.8%	23.1%	0.0%	0.0%
60-69 years (n=85)	17.6%	30.6%	28.2%	18.8%	2.4%	2.4%
70-79 Years (n=88)	4.5%	26.1%	42.0%	23.9%	3.4%	0.0%
80 Years plus (n=20)	10.0%	20.0%	45.0%	20.0%	5.0%	0.0%

More than 74% of all respondents said they were in good to excellent health. Only 2.9% rated their health as poor. Of the males, 86.9% rated their health as good to excellent compared to 69.6% of females. None of the men claimed to be in poor health, whereas 4.1% of women rated themselves in the poor health category.

As might have been expected, the proportion of respondents who rated their health as "excellent" decreased with age, although responses for those aged 80 and older (10%) was higher than for those in the 70-79 years range (4.5%). For all age groups, ratings of "good" to "excellent" were far in excess of ratings of "fair" to "poor", even in the older age groups.

Interviewees were asked to rate their health on a five point scale, compared with others of their own age. Table 9 shows their responses.

Table 9: Comparative Health
(N = 206)

Better	Sometimes Better	Same	Sometimes worse	Worse	No response
43.1%	19.2%	29.0%	5.4%	2.2%	1.5%

Most participants (62.3%) considered their health to be better or sometimes better than that of their contemporaries. Overall, a very high 91.3% perceived themselves to be as healthy as or healthier than others their age.

During the interviews the RAs were asked to note whether participants had any obvious physical difficulties and to fill in a check list containing a number of items related to observations about participants' health/fitness immediately following an interview. These items related to hearing and sight; mobility; and other obvious difficulties such as shortness of breath, speech problems (not language), confusion, and so forth, which might have affected participants' ability to take part in groups. The Ras observations are summarised in Table 10 and these reinforce interviewees perceptions that they tended to be in good health.

Table 10: Observed Physical Capabilities
(N=202)

	Number	%
No obvious difficulties	161	79.7%
Hearing/sight difficulties	18	8.9%
Mobility difficulties	11	5.5%
Other difficulties	12	5.9%

An additional health/fitness-related item involved participants filling out a matrix of common activities of daily living which gave an indication of the ease with which they could perform the tasks. Participants were asked to tick whether they could do each item easily; with difficulty; with help; with a little time; whether they were unable to do the task; or whether they did not need to do the task. An abbreviated set of responses is shown in Table 11.

Table 11: Activities of Daily Living Performed Easily or With a Little Time
(N=206)
(Percentages are calculated excluding "Don't need to do" responses in each category)

	Dish Washing	Shopping	Washing Car	Light Gardening	Cleaning	Mowing	Minor House Repairs	Heavy Gardening
Total	96.4%	89.2%	85.5%	74.9%	79.9%	65.5%	58.5%	49.6%
50-59 Years	100.0%	92.3%	100%	76.9%	100.0%	83.3%	62.5%	57.1%
60-69 Years	96.3%	94.1%	85.5%	78.8%	83.3%	68.2%	51.8%	61.1%
70-79 Years	100.0%	86.3%	82.5%	73.8%	78.5%	64.6%	62.7%	64.6%
80 plus Years	94.7%	78.9%	80.0%	50.0%	68.8%	54.5%	54.5%	18.2%
Female	90.2%	77%	36.3%	78.3%	75.9%	38.2%	33.8%	33.8%
Male	100.0%	96.5%	90.2%	86.9%	90.4%	92.7%	87.9%	70.8%

Table 11 further reinforces participants' positive assessments of their health. Most appear to be quite capable of taking care of themselves with respect to normal household chores. Generally, they were able to carry out most tasks easily, although a few needed to take their time while doing the specific activity. One third of participants did not need to do minor house repairs but, of those who did, 58.5% said they could do repairs easily even though some would need to take their time. Thirty-five per cent had no lawn to mow. Heavy gardening was unnecessary for 36.9% of respondents; of the rest, 49.6% could manage easily where necessary.

Males appear to be less constrained in their abilities to perform daily tasks than females. However, some of the results in which the difference is quite large [for example, repairs: (f=33.8%; m=87.9%); mowing: (f=38.2%; m=92.7%); and heavy gardening: (f=36.4%; m=70.8%)], could reflect traditional gender role activities, for which females have not acquired the necessary skills, rather than merely lacking physical strength or capacity as affected by ageing.

4.1.5 Familial Status.

Tables 12-14 give details of the interviewees' living arrangements.

Table 12: Familial Status
(N=205)

	Number	%
Alone - House	53	25.7
Alone - Flat	15	7.3
With Spouse/Friend	106	51.5
With Family	26	12.6
Other	5	2.9

Over half the respondents (51.5%) lived with a spouse or friend, 33% lived alone in a house or flat, and 12.6% lived with their families. The remainder (2.9%) lived in other accommodation such as Retirement Villages or Supported Accommodation. Table 13 and Table 14 show a further breakdown of these data by gender and age.

Table 13: Gender by Familial Status
(N=206)

	Alone - House/flat	With spouse/ friend	With Family	Retirement Village or Supporting Accommodation
Female (n=145)	41.4%	40.7%	13.8%	3.5%
Male (n=61)	13.1%	77%	9.8%	0%

A much smaller proportion of males (13.1%) than females (41.4%) lived alone. It is possible that males who live alone do not join groups or, a more likely possibility is, because women live longer than do males, females are inevitably alone for a longer period of time. The latter supposition appears to be reinforced by the data in Table 14 which shows that the majority of people who live alone are in the oldest age ranges

Table 14: Age Range and Familial Status
(N = 206)

	Alone - House/flat	With spouse/ friend	With Family	Retirement Village or Supporting Accommodation	Other
50-59 years (n=13)	7.7%	46.2%	46.2%	0.0%	0.0%
60-69 years (n=85)	20%	63.5%	14.1%	1.2%	1.2%
70-79 years (n=88)	44.3%	45.5%	6.8%	3.4%	0.0%
80 years plus (n=20)	55%	30%	10.0%	5.0%	0.0%

4.1.6 Prior Occupations

Respondents were asked to list their former occupations as well as those of their spouses. These were coded in one of three main categories: white collar (professional, clerical, and so forth); blue collar (farmers, tradespeople, factory employees, and so forth); and, home maker.

Table 15: Gender and Prior Occupational Status.

	White Collar	Blue Collar	Home Maker
Total (N=206)	65.5%	19.9%	14.6%
Female (n=145)	62.8%	17.2%	20.0%
Male (n=61)	72.1%	26.2%	1.6%

As shown in Table 15, the greatest proportion of belongers came from those formerly employed in white collar jobs (65.5%). Those from blue collar jobs recorded 19.9%, and home makers recorded 14.6%. Similar information was also requested about belongers' spouses and these data are shown in Table 16.

Table 16: Belongers' Spouses and Prior Occupational Status
(N=176)

	White Collar	Blue Collar	Home Maker	No Spouse
Total Spouses (N=176)	60.2%	29.5%	7.4%	2.8%
Females' Spouses (n=123)	58.5%	38.2%	0.0%	3.3%
Males' Spouses (n=53)	64.2%	9.4%	24.5%	1.9%

Thirty participants did not provide answers to this question. Of those who did, some 60% were married to white collar workers; 29.5% were married to blue collar workers and 7.4% were married to home makers. That is, our sample of voluntary group belongers and their spouses were predominantly from "white collar" backgrounds.

Most respondents were people who had been in the paid workforce before retirement. It may be useful to speculate on possible reasons for this finding. First, it is possible that the sampling procedure discriminated for, or against, some groups, for example, home makers may not have had the same confidence or inclination to volunteer to be interviewed as did those in paid employment. Other possible explanations include the following:

- Many home makers have strongly established family and other social networks and may not seek alternative activities in their retirement to the same extent as those who have been in the paid workforce.
- Since personal identity is strongly tied to occupation, those from the paid workforce may find themselves in need of a new "sense of self" on retirement and may use identification with a particular club or group as a replacement. Again, retirement may not pose such a significant change to non-paid workers as it does to those who have always gone out to paid work.
- As will be shown later, many group belongers carry out significant "giving roles" in their clubs, such as training workers, office bearers, or as voluntary workers. Those who have gone out to paid work may be continuing to go to work; they may have merely replaced paid employment with unpaid employment.

The question of whether prior paid work history may be a predictor of belonging in later life warrants further investigation since it impacts on the role that voluntary organisations can play in the lives of senior Australians

4.1.7 Non-Group Activities

Participants were shown a table of common leisure and recreational activities not specifically associated with voluntary group membership, and asked to indicate the frequency of the activities which applied to them. Responses are summarised inTable 17

Table 17: Participation in Non-Group Activities
(N=206)

	A Lot Each Day	A Little Each Day	Weekly	Monthly	Rarely	Never
Church (n=203)	1.5%	.5%	36.0%	8.9%	19.2%	34.0%
Learning (n=197)	6.1%	14.7%	14.7%	12.7%	28.4%	23.4%
Visiting (n=200)	4.0%	9.0%	58.0%	19.0%	9.55	0.5%
Reading (n=204)	36.8%	50.5%	5.9%	1.5%	4.4%	1.0%
Going Out (n=201)	2.5%	2.0%	30.8%	28.4%	30.8%	5.5%
Exercise (n=200)	16.5%	45.5%	22.0%	1.0%	9.5%	5.5%
Hobby (n=196)	23.0%	22.0%	23.0%	7.7%	11.2%	13.3%
Television (n=200)	19.5%	74.0%	3.5%	0.0%	2.55	0.5%
Bingo (n=195)	1.0%	1.0%	9.2%	9.2%	13.8%	65.6%
Assisting (n=201)	7.5%	21.4%	31.3%	16.9%	14.9%	8.0%

The most frequently occurring activities carried out by individuals on a daily basis, which were not organised by a formal group, included watching TV (93.5%), reading (87.3%), exercise such as swimming or walking (62%), and doing hobbies such as craft or cards (45%). On a weekly basis, visiting or having visitors (58%); attending church (36%); helping neighbours or friends (31.3%); and going out, for example, to dinner or sporting events (30.8%), were the most popular. Fifty-three per cent of respondents rarely or never went to church, and nearly 80% rarely or never played bingo. Of some concern, is that 51.8% stated that they rarely or never learnt something new or developed a new skill. Exercise in later life is promoted heavily by health agencies because the benefits of exercise, particularly for older adults, are well documented (Jones, 1992). Sixty-two per cent of our interviewees exercised every day and 84% exercise at least weekly.

Females and males participated at relatively the same rate in the activities of reading, television watching, and assisting other people. Male participation was much greater in visiting, going out and exercise activities while females more frequently participated in church (f=75%, m=20%), learning (f=70%, m=25%), hobbies and crafts (f=80.7%, m=62.5%), and bingo (f=24.3%, m=10.9%) activities.

Table 18 shows the breakdown by age range and some common leisure activities which were not organised by any formal group.

Table 18: Participation in Activities at Least Once a Month and Age Range
(N=206)

	50-59 Years (n=13)	60-69 Years (n=85)	70-79 Years (n=88)	80 Years plus (n=20)
Church	61.5%	48.8%	44.2%	40.0%
Learning	50.0%	57.3%	39.8%	45.0%
Visiting	100.0%	90.2%	90.7%	83.3%
Reading	100.0%	92.8%	97.7%	95.0%
Going Out	76.9%	66.3%	63.5%	45.0%
Exercise	92.3%	86.6%	85.2%	70.5%
Hobby	76.9%	83.1%	70.4%	63.2%
Television	100.0%	97.6%	95.5%	100.0%
Bingo	0.1%	19.8%	20.2%	35.3%
Assisting	92.3%	75.3%	81.6%	50.0%

Church attendance, going out, and exercise tended to decrease with age and, possibly, as a result of decreased mobility. Hobby and craft activities also show a small decrease with age. Learning something new or developing a skill is somewhat more common for the young-old than for the old-old. Visiting, reading and television continue as high level activities throughout all age ranges. Bingo, although not a major activity (66% of interviewees never play), is most popular with the oldest age group. As might be expected, assisting friends or neighbours decreases with age.

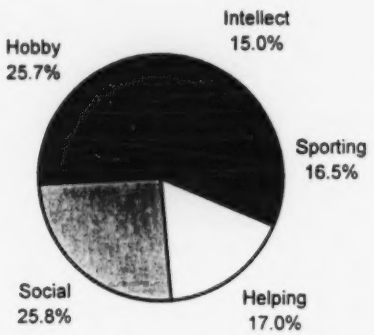
In the following section the analysis shifts to the specific categories of voluntary groups and clubs and the characteristics of the people who join each type of group.

4.2 ANALYSIS OF GROUP MEMBERSHIP

4.2.1 Characteristics of Groups

Voluntary group member interviewees were initially contacted with the assistance of office bearers from voluntary organisations which fell into one of our five major categories - intellectually challenging, sporting, helping others, social, and hobby. Interviewees were asked to list all the clubs to which they currently belonged. These clubs were subsequently coded in terms of the major focus of the club. The five major foci were: intellectual challenge (e.g., historical societies, U3A, genealogy societies, bridge clubs, chess clubs etc.); sporting/exercise (e.g., bowls clubs, golf clubs, tennis clubs, aqua aerobics, etc.); helping others (e.g., Meals-on-Wheels, St Vincent de Paul, Red Cross Society, first aid groups; etc.); social (e.g., Senior Citizens groups, bingo groups, etc.); and hobby groups (e.g., model railway groups, knitters clubs, gardening societies, music etc.). Figure 1 shows the percentage of interviewees from each category.

Figure 1: Groups Surveyed
(N=206)



Because most of the interviewees belonged to a number of clubs from several of the five major categories, the proportions shown in Figure 1 do not necessarily reflect their major interests. (Groups outside these major categories, were coded "other" and not considered for analysis. These included groups like Weight Watchers, political and professional societies, various Church Fellowships, and the like.) If the major focus of the activity was not immediately apparent the group was coded in terms of the tasks with which the interviewees stated they were involved. For example, senior citizens groups often run a range of activities which cover a number of categories. If a participant from a senior citizens club indicated that his/her major activity was singing then that was categorised as hobby rather than social. Table 19 shows the types of clubs to which the 206 interviewees belonged.

Table 19: .Membership of Clubs for Each of the Five Major Categories.
(N=206)

Major focus of clubs joined	Major Category of Surveyed Clubs				
	Intellectual (n=31)	Sporting (n=34)	Helping (n=35)	Social (n=53)	Hobby (n=53)
Intellectual		5.9%	14.3%	5.7%	11.3%
Sporting	25.8%		31.5%	33.9%	26.4%
Helping	38.7%	14.7%		24.9%	24.5%
Social	19.4%	70.5%	28.6%		52.8%
Hobby	9.7%	5.9%	11.4%	9.4%	
Other	16.2%	47.1%	48.7%	28.2%	30.2%

In Table 19, because multiple responses were involved, percentages are not additive in either row or column. This table should be interpreted as follows. The "Major Category of Surveyed Clubs" heading shows the five main categories of clubs from which interviewees were drawn (see Figure 1). The "Major focus of clubs joined" column refers to the other kinds of clubs to which interviewees belonged. For example, under the Major Category of Surveyed Clubs heading, the column labelled "Intellectual" shows that 31 people were interviewed initially from clubs which had a predominantly intellectually challenging focus (e.g., Queensland Historical Society, Genealogical Society of Queensland, bridge clubs etc.). Of these 31 people, 25.8% (8 people) also belonged to clubs which had a sporting focus (e.g. tennis, golf, bowls); 38.7% also belonged to clubs with a helping others focus (e.g. Meals-on-Wheels, Red Cross, hospital visiting groups); 19.4% also belonged to clubs with a social focus (e.g. Senior Citizens, RSL, darts club); 9.7% also belonged to clubs with a hobby focus (e.g. gardening clubs, model railway clubs, knitting clubs); and 16.2% also belonged to other types of groups which fell outside our five major categories of interest (e.g. political or church groups). The other four columns should be interpreted in a similar way.

Note: the large percentages in the "Other" row do not refer to the number of groups; they refer to interviewees within a specific category. For example, 48.7% of the 35 people who were interviewed from clubs in the "helping others" category, also belong to clubs such as religious, political or professional clubs which were not considered within our study.

In total, the 206 interviewees belonged to 705 voluntary groups. Almost forty per cent (39.8%) belonged to four or more clubs. However, as will be shown later in Table 22, belonging to large numbers of clubs does not necessarily relate to high total hourly involvement. The heaviest users of clubs may belong to three or fewer clubs.

Table 20 shows the interviewees' involvement by group membership.

Table 20: Distribution of Participants in Group Categories.
(N=206)

	Percentage of total sample in each type of club			
	0 groups	1 group	2 groups	3 or more groups
Intellectual	77.2%	10.2%	8.7%	3.9%
Sporting	60.7%	27.7%	8.7%	3.0%
Helping	63.1%	23.3%	8.3%	5.4%
Social	45.1%	33.0%	15.0%	6.8%
Hobbies	73.3%	14.1%	8.3%	4.3%
Other	66.5%	20.9%	6.8%	5.5%

The percentages in Table 20 add across. The first row shows that 77.2% of the 206 interviewees did not belong to a club or group with an intellectual focus. Of the remaining 23.8 per cent who did, 10.2% belonged to one intellectually challenging group, 8.7% belonged to two, and 3.9% belonged to three or more such voluntary groups. The remainder of the rows can be similarly interpreted.

4.2.2 Hours per Week Spent on Clubs and Groups

The foregoing has shown that many older people belong to a number of different clubs and groups. Interviewees were asked to indicate on average the approximate number of hours per week which they spent on all voluntary group activities. Table 21 summarises this information by gender and age range.

Table 21: Gender and Age by Hours per Week Spent on Activities
(N = 204)

	Less than 5 hours per week	5 -10 hours per week	11 - 20 hours per week	Over 20 hours per week
Total (N = 204)	24.2%	40.7%	27.9%	7.4%
Females (n=144)	27.8%	41.7%	24.3%	6.3%
Males (n=60)	15.0%	38.3%	36.7%	10.0%
50-59 years (n=12)	25.0%	50.0%	25.0%	0.0%
60-69 years (n=85)	30.6%	36.5%	25.9%	7.1%
70-79 years (n=87)	18.4%	41.4%	31.0%	9.2%
80+ years (n=20)	20.0%	50.0%	25.0%	5.0%

In total; twenty-four per cent were low involvement users who spent less than 5 hours a week. 68.6% of interviewees were either moderately involved (5-10 hours) or heavily involved (11-20 hours) with their voluntary activities each week. The remaining 7.4% were very heavily involved and devoted more than 20 hours to group activities each week. Males tended to devote more hours per week to activities than females, and the old-old tended to be more heavily involved than the young-old. Table 22 outlines the breakdown of hours devoted to activities per week by number of clubs.

Table 22: Number of Clubs Joined by Weekly Involvement
(N=204)

	Less than 5 hours per week (n=49)	5 - 10 hours per week (n=83)	11 - 20 hours per week (n=57)	Over 20 hours per week (n=15)
1 Club	26.5%	13.3%	7.0%	20.0%
2 Clubs	30.6%	22.9%	15.8%	6.7%
3 Clubs	20.3%	25.3%	22.8%	33.3%
4-5 Clubs	18.4%	27.7%	35.1%	13.3%
6 plus Clubs	4.1%	10.8%	19.3%	26.7%

The number of hours spent on activities does not necessarily relate to the number of clubs to which older people belonged. For example, in the "Less than 5 hours per week" column, an unexpectedly large percentage belonged to several clubs. This would appear to indicate that some members belong but do not participate. Interviews with office bearers, particularly of senior citizens clubs, reinforce this view. Several times office bearers made the point that senior citizens clubs' members' active participation continued to decline each year and that many members only attend on occasions when special events are offered, such as subsidised meals or concerts.

4.2.3 Group Participation and Health-Related Issues

Earlier it was shown that interviewees generally regarded themselves to be in good health (Section 4.1.4). Interviewees were also asked whether they had any health problems which affected their ability to get to groups or activities. If so, they were asked to indicate the severity of the problem. The responses by age range and gender are shown in Table 23.

Table 23: Age Range and Gender by Effect of Health on Participation
(N=204)

	No effect	Hardly ever	Some of the time	Most of the time	All the time	Depends on what or how I do things
Total (N=204)	70.1%	7.4%	10.3%	3.9%	2.9%	5.4%
50-59 Years (n=13)	92.3%	0.0%	7.7%	0.0%	0.0%	0.0%
60-69 Years (n=84)	71.4%	6.0%	10.7%	4.8%	1.2%	6.0%
70-79 Years (n=87)	70.1%	6.9%	9.2%	3.4%	4.6%	5.7%
80 plus Years (n=20)	50.0%	20.0%	15.0%	5.0%	5.0%	5.0%
Female (n=144)	68.1%	7.6%	9.7%	3.5%	4.2%	6.9%
Male (n=60)	75.0%	6.7%	11.7%	5.0%	0.0%	1.7%

From the information in table 23 it is clear that the majority (77.5%) stated that their health never or hardly ever affected their ability to get to groups or activities. One interviewer noted the case of a respondent who was wheelchair bound due to polio contracted as a teenager and who experienced considerable mobility problems as a result. Nevertheless, this person rated his/her health as good and indicated that there were hardly ever health problems which affected his/her ability to get to voluntary group activity. Many comments were recorded expressing the sentiment that interviewees had some health problems but, despite these, they were "better off than most". Just over 14% said they were affected some or most of the time and 2.9% were affected all the time. Between the different age ranges, a marked drop in the "no effect" response occurs as age increases, for example, between the 50-59 years age range (92.3%) and the 60-69 years age range (71.4%), the 70-79 years range (70.1%) and the 80 plus years (50.0%). There appears to be few differences between the genders as regards the effect of health status on participation. Mobility problems arising from complaints of an arthritic nature were the most frequently cited as the cause affecting participation. Table 24 shows the number of hours per week spent in voluntary group activities and interviewees self-rated health.

Table 24: Health Rating and Weekly Involvement
(N=202)

Health Rating	< 5 hours per week	5 - 10 hours per week	11 - 12 hours per week	20+ hours per week
Excellent (n=26)	30.8%	46.2%	15.4%	7.7%
Very Good (n=54)	16.7%	40.7%	35.2%	7.4%
Good (n=73)	27.4%	43.8%	26.0%	2.7%
Fair (n=43)	23.3%	32.6%	27.9%	16.3%
Poor (n=6)	33.3%	50.0%	16.7%	0.0%

For the relatively small numbers of those who claim to be in fair or poor health, it would seem reasonable to assume that their involvement with activities might have been considerably curtailed. However, this does not always seem to be the case. The majority of those who rated their health as fair or poor, were moderately or heavily involved with their activities each week. The largest percentage (16.3%) of those who were very heavily involved each week (more than 20 hours a week), came from those who rated their health as fair. These interesting findings suggest that the contribution made by voluntary groups towards ailing individuals' quality of life, is sufficiently important for many that they appear to outweigh the negative consequences of poor health.

4.2.4 Group Participation by Gender

Table 25 shows the gender distribution by principal category of groups

Table 25: Gender and Principal Category of Groups
(N=206)

	Intellectual	Sporting	Helping	Social	Hobby
Female (n=145)	21.4%	32.4%	36.6%	56.6%	30.3%
Male (n=61)	26.2%	55.7%	37.7%	50.8%	18.0%

Because many members belonged to more than one voluntary group neither the columns nor the rows are additive. As can be seen from Table 25, males appear to be more attracted to intellectually challenging clubs and sporting clubs than females. The reverse is true for social clubs and hobby clubs.

(More detailed information about multiple group membership in each of the categories can be found in Appendix 1, Figures A1-A5.)

4.2.5 Age Range and Group Involvement

Table 26 shows the age ranges of interviewees by major group category.

Table 26: Age Range and Involvement in Groups
(N=206)

	Intellectual	Sporting	Helping	Social	Hobby
50-59 years n = 13	23.1%	53.8%	38.5%	30.8%	53.8%
60-69 years n = 85	23.5%	41.2%	36.5%	49.4%	30.6%
70-79 years n = 87	23.9%	36.4%	38.6%	60.2%	22.7%
80 years plus n = 20	15.0%	35.0%	30.0%	70.0%	10.0%

Because participants were able to make multiple responses, neither columns nor rows are additive. Thus, Table 26 should be interpreted as follows. Reading across the first row for the thirteen interviewees aged 50-59 years old: 23.1% of them belonged to intellectually challenging groups; 53.8% of them belonged to sporting groups; 38.5% belonged to helping

others groups, and so on. The other rows should be similarly interpreted. A number of generalisations can be drawn from this table.

- Past age 80, there is a marked drop in the proportion of participants who participate in intellectually challenging activities.
- Participation in sporting clubs decreases as age increases.
- Age does not appear to have an affect on membership of "helping" clubs until the age of 80 years plus.
- Membership of social groups increases with age.
- Younger people appear to be far more interested in hobby groups than older people

(More detailed information about multiple group membership in each of the categories can be found in Appendix 1, Figures A6-A10.)

4.2.6 Education Level and Group Involvement

Table 27: Educational Level and Involvement in Groups
(N=199)

Highest Level of Education	Intellectual	Sporting	Helping	Social	Hobby
Primary (n=62)	4.8%	40.3%	24.2%	67.7%	30.6%
Two Years Secondary (n=44)	25.0%	36.4%	43.2%	38.6%	25.0%
Full Secondary (n=35)	28.6%	28.6%	34.3%	54.3%	34.3%
Trade Certificate (n=22)	4.5%	50.0%	54.5%	59.1%	13.6%
Tertiary (n=36)	50.0%	41.7%	47.3%	52.8%	19.4%

Because participants were able to give multiple responses, data in the cells in Table 27 are not additive. Instead they should be interpreted as follows: reading across the first row for the 62 interviewees whose highest level of formal education was primary school: 4.8% of the primary group belonged to intellectually challenging groups; 40.3% of the primary group belonged to sporting groups; 24.2% of the primary group belonged to helping others groups; and so on. The other rows should be similarly interpreted.

A greater proportion of participants with tertiary qualifications (50%) belonged to intellectually challenging groups. Of those whose highest formal education did not extend beyond primary school, only 4.8% belonged to an intellectual group. From those who completed 2 years of high school, 25% belonged to this type of group, and 28.6% of those who finished high school were members. The category with the lowest involvement in intellectually challenging groups (4.5%) were seniors who had attained a trade certificate.

Formal education does not seem to impact on membership of sporting groups. Over forty per cent (40.3%) of those who completed primary school belonged to one or two sporting groups while 36.4% of those who completed 2 years of high school also belonged to at least one group. Of those who finished high school, 28.6% were members of at least one sporting group, as were 50% of those with a trade certificate. It could be that those with trade certificates have worked in jobs which require physical activity and in retirement, they maintain this physical activity through sporting groups. In addition over forty per cent (41.7%) of those who have tertiary education belonged to sporting groups.

Again, formal education appears to be of limited use as a predictor of the tendency to join a :"helping others" voluntary group. Just over twenty-four per cent (24.2%) of those who completed primary school were members of helping groups compared to 54.4% for those with trade certificates and 47.3% of those who have a tertiary education.

For social group membership there was no easily discernible trend. Involvement in social groups tended to fluctuate across the educational levels. It was highest (67.7%) in the group which completed primary school as their highest level, dropped to 38.6% at the first secondary level, rose to 54.3% at full secondary and again to 59.1% for the trade certificate level. A drop then occurred at tertiary level (52.8%).

Level of formal education appeared to be inversely related to hobby group membership. A lesser proportion of tertiary educated participants than secondary educated participants were members of hobby groups. Of those whose highest level of education was primary school, 30.6% belonged to at least one and as many as six groups, as did 25% of those who received two years of high school education. Just over thirty-four per cent (34.3%) of interviewees who finished high school belonged to at least one hobby group. The lowest representation in hobby group membership came from those who had a trade certificate (13.6%). Since most trade certificate holders were male and many of them belonged to sporting groups, the previous interpretation that males may consider their sport as their hobby, seems reasonable. Membership of hobby groups was clearly lowest among those with tertiary education (19.4%). A number of generalisations can be drawn from these tables:

- Those with higher formal education levels are more likely to become involved with intellectually challenging groups than those with lower formal education levels.
- People with a primary education are most likely to be attracted to social, sporting and hobby groups.
- Hobby groups attract members from all educational backgrounds although those with trade or tertiary qualifications appear to be least interested.

In the next section, the former occupation was compared with the group membership patterns.

4.2.7 Occupation History and Group Membership

Interviewees were asked to indicate their occupation prior to retirement. These were subsequently classified as white collar (e.g., clerical, professional), blue collar (e.g. trades or unskilled) and home maker.

Table 28 shows a breakdown of interviewees' prior occupations by the types of clubs they joined.

Table 28: Prior Occupation by Groups Focus
(N=206)

	Intellectual	Sporting	Helping	Social	Hobby
White Collar (n=135)	28.1%	42.7%	40.0%	50.4%	28.9%
Blue Collar (n=41)	9.8%	36.6%	31.7%	65.9%	19.5%
Home Maker (n=30)	16.7%	36.7%	30.0%	60.0%	26.7%

Because interviewees belonged to several kinds of clubs, percentages are not additive in either columns or rows. Table 28 should be interpreted as follows. For example, in the White Collar row, of the 135 respondents 28.1% belonged to intellectually challenging groups; 42.7% also belonged to sporting groups; 40.0% also belonged to helping others groups; 50.4% also belonged to social groups, and so forth.

Previous occupation seems to have some influence on the choice of group membership for third agers. Of the former white collar workers surveyed, 28.1% belonged to at least one intellectually challenging group and some belonged to as many as six such groups. In

contrast, former blue collar workers were least attracted to intellectually challenging groups (9.8%). Home makers were somewhat better represented (16.7%) in the intellectually challenging groups, although this and the blue collar percentage were the lowest of the 15 possible combinations.

For sporting and helping groups the differences between members on the basis of prior occupation were relatively small, although these groups were somewhat more popular with the former white collar members.

Former blue collar workers were most heavily involved with social groups (65.9%), but the other two occupation categories were also heavily involved with social groups, (white collar - 50% and home maker 60%). Hobby groups were somewhat less appealing for former blue collar workers (19.5%), although neither white nor blue collar work categories rated hobbies as highly as sporting, helping and social groups.

(More detailed information about multiple group membership in each of the categories can be found in Appendix 1, Figures A11-A13.)

4.2.8 Principal Reasons for Joining

Interviewees were asked to list their reasons for choosing each specific group or activity. Although wording varied, five main reasons emerged from the answers provided by the interviewees and these are shown in Table 29. A large number of responses (30.1%) which did not fall into a category large enough to specify are included as "other" reasons.

Table 29: Main Reasons for Joining a Group or Activity
(N=206)

Principal Reason for Joining	%
For social contact	52.0
To help others	40.3
For sport, fitness and/or exercise	33.7
For intellectual challenge	26.7
For personal enjoyment	23.8
Other reasons (e.g., keep busy, convenient, family tradition, etc.)	30.1

Social contact was the most frequently cited reason for belonging, with more than half the responses (52%) related to an interest in mixing with other people. The next most important reason given was to help others; over forty per cent (40.3%) of respondents had joined groups because they enjoyed helping others. Sport, and/or fitness/exercise (33.7%), and the need for intellectual stimulation(26.7%) were the next most important reasons, followed by personal enjoyment (23.8%).

The breakdown of main reasons for joining by gender is shown in Table 30.

Table 30: Gender and Main Reason for Joining
(n=206)
(Participants gave multiple responses)

	For personal enjoyment	For intellectual challenge	For sport, fitness and/or exercise	To help others	For social contact
Female (n=145)	25.0%	26.9%	28.3%	38.6%	53.8%
Male (n=61)	33.0%	26.2%	46.7%	44.3%	47.5%

In Table 30, participants gave multiple answers so neither the columns nor rows are additive. For both sexes, the table shows that social contact was the main reason for joining a voluntary group. Females (53.8%) rated social contact higher than males (47.5%). Males recorded considerably higher responses for sporting (46.7% versus 28.3%), and somewhat higher for helping (44.3% versus 38.6%) and enjoying (33% versus 25%) reasons. Responses in the categories of Intellectual challenge were almost identical (f=26.9%, m=26.2%).

Groups may play an important role in increasing social networks, and may be particularly important for those who live alone. Table 31 shows the breakdown of interviewees' living arrangements according to their stated principal reasons for joining.

Table 31: Familial Status and Main Reasons for Joining
(N=200)

	For Intellectual	For Sporting	For Helping	For Social	For Enjoy
Alone - house/flat (n=68)	25%	32.4%	38.2%	63.2%	10.3%
With spouse/ friend (n=106)	26.4%	34.9%	39.6%	45.3%	28.3%
With family (n=26)	30.8%	42.3%	38.5%	38.5%	34.6%

As anticipated, the highest response (63.2%) for social contact reasons came from participants who lived alone. Responses from the other two major living situation categories came from participants who lived with others, and their stated reasons were comparatively evenly distributed across the five main reasons for joining.

4.2.9 "Giving" and "Getting" Tasks

Participants were asked to list the tasks and activities they were involved with in each of the voluntary organisations to which they belonged. Responses were later categorised as either "giving" or "getting" (somewhat arbitrarily). Giving tasks involved activities which would directly benefit others in the club, such as service as an office bearer, coach or trainer; maker of morning tea; fund raiser; and so forth. Getting tasks were associated with the principal mission of the club such as: taking part in bridge, darts, chess and bowls; singing in the choir; exercise; meeting people; and so forth.

More than two-thirds of participants (68.9%) were involved in giving activities in at least one of the clubs to which they belonged. Eighty-five percent (85%) belonged to at least one group where getting was their major task. It would appear that some members join clubs largely because they enjoy assisting others but that "getting" and "giving" reasons can motivate an individual in different ways in different groups..

In Table 32, giving/getting is broken down by age range.

Table 32: Giving and Getting Tasks by Age Ranges
(N=206)

	50-59 Years (n=13)	60-69 Years (n=85)	70-79 Years (n=88)	80 plus Years (n=20)
To Give	84.6%	68.2%	71.6%	50.0%
To Get	61.5%	70.6%	68.2%	65.0%

In general, Table 32 shows that the tendency towards "giving" fluctuates, but decreases with increasing age, although half of the participants aged 80 years plus were still involved in helping others in their club. Health and mobility problems which are more frequently associated with advancing age may account, in some part, for this age-related finding. Or, perhaps there is a feeling that giving is a necessity in a voluntary organisation if that organisation is to remain viable. Some indication that participants may feel an obligation to give is conveyed in the words of one 80 years or older participant who stated "I've done my bit. It's time to give the younger ones a go".

Although actual numbers are small, the large proportion of givers in the 50-59 years age range (84.6%) is noteworthy. These could be people who have recently retired and who continue to regard work in clubs or voluntary organisations as an important part of their lives.

While "giving" tasks decreased with age, "getting" tasks unrelated to age groups. The amount of time which third agers spent on group activities was discussed fully in Section 4.2.2.

Table 33 shows the breakdown of giving/getting tasks and the number of hours per week which each interviewee devoted to his/her clubs.

Table 33: Giving and Getting Tasks by Weekly Involvement
(N=312)

	Under 5 hours (n=72)	5-10 hours (n=124)	11-20 Hours (n=94)	Over 20 hours (n=22)
To Give	37.5%	45.2%	48.9%	50.0%
To Get	62.5%	54.8%	51.1%	50.0%

The total (N) exceeds the total number of interviewees because some interviewees were involved in both "giving" and "getting" tasks.

In terms of "giving" and "getting" tasks Table 33 suggests some interesting possibilities. Participants in the under 5 hours a week category are comparatively light users of clubs. The majority of them (62.5%) appear to be attracted to clubs specifically to "get" something from their voluntary organisations. In contrast, as clubs play an increasingly important part in the weekly lives of participants, the level of service to the club and its participants appears to increase. The percentage of participants who are involved with giving increases to the point where half the heavily committed users (over 20 hours per week) are givers. These are likely to be the club stalwarts whose efforts are primarily responsible for the vitality of the organisation. For them, the club is almost a full time, unpaid job.

We met several of these stalwarts during the preliminary interviews with officials when we set about explaining the project and obtaining their support. All were dedicated to their organisations. Most enjoyed their work and the camaraderie, and the knowledge that they were doing a good job. Importantly, many were people who had held organisational management roles in their earlier paid working lives. However, some did not enjoy the many hours they felt obliged to put into the organisations in order to keep them viable. This sentiment was prevalent in a few of the senior citizens clubs where one president stated flatly that the organisation would fold if she quit, and she had wanted to quit for several years. Another stated that most members of senior citizens clubs are only in the club for what they can get out of it and will not help with the organisation. Again, this organiser would have quit her voluntary position if others were prepared to do the work.

4.2.10 Length of Time in Clubs

Membership persistence is another useful measure for describing the characteristics of members and organisations. Do older people tend to retain their membership of organisations for extended periods or do they "shop around" for the most suitable offerings? Interviewees were asked to state how long they had belonged to each of their voluntary organisations, and this information was subsequently coded as short, medium or long term membership. Details by gender and age range are summarised in Table 34.

Table 34: Gender and Age, by Years Spent in Activities
(N=206)

	Short Term (0-2 years)	Medium Term (3-9 years)	Long Term (10 years plus)
Total (N=206)	44.0%	62.0%	69.0%
Females (n=145)	44.8%	62.8%	66.9%
Males (n=61)	42.6%	60.7%	75.4%
50-59 years (n=13)	53.8%	53.8%	69.2%
60-69 years (n=85)	51.7%	58.8%	58.8%
70-79 years (n=88)	35.2%	65.9%	76.1%
80 years plus (n=20)	45.0%	65.0%	85.0%

Because many participants had belonged to several clubs for variable lengths of time, their responses ranged across multiple categories. Therefore the percentages in Table 34 are not additive and should be interpreted as follows. In the Total row (N = 206), 44.0% had belonged to one or more clubs for 0-2 years, 62.0% had belonged to one or more clubs for 3-9 years, and 69.0% had belonged to one or more clubs for 10 years or longer. The remainder of the cells should be interpreted in this way.

The majority of seniors show a pattern of long term persistence; 69% of the total claim membership exceeded ten years in at least one group. Sixty-two per cent were in at least one club for between three to nine years, and 44% had joined at least one club within the past two years. One busy person had been a member of nine groups for more than 10 years. Some cited membership of groups such as the Returned Services League (although this type of club was not part of our study) for 40 or 50 years. The pattern of long term persistence holds for all age ranges. This indicates that interviewees probably belonged to some of their clubs prior to retirement. Another interesting observation relates to the short term column. Forty-five per cent of people aged 80 and over, and 35.2% of people aged 70-79 years, recently joined voluntary organisations. These comparatively large percentages indicate that the old-old joiners continue to seek new experiences which can improve their quality of life.

4.2.11 Best and Worst Aspects of Activities

Interviewees were asked to list the three "best" and the three "worst" things about their activities in the voluntary groups to which they belonged. The most frequently occurring responses are summarised in Table 35 and Table 36. Again the responses are not additive because individuals belonged to more than one voluntary organisation.

Table 35: Best Aspects of Activities
(N=206)

Social Contact	Intellectual Challenge	Helping	Exercise or sport	Other
84.0%	43.2%	28.6%	23.8%	19.0%

Responses involving social contact (such as making new friends, meeting like-minded people etc.) were by far the most frequently cited amongst the "best" three aspects about belonging to voluntary groups (84%). Somewhat unexpectedly, intellectual stimulation (43.2%) was the next most frequently cited despite the fact that comparatively few of the clubs had an overtly intellectually stimulating focus. Comments like "it keeps the mind active" and "keeps the brain active and motivated", were given as reasons for belonging by some members of clubs which did not appear have any obvious intellectually challenging focus. It appears that some members gain intellectual stimulus from belonging, regardless of the principal focus of the group. Satisfaction with helping others was the next most frequent response, cited by 28.6% of interviewees. One person spoke of "being able to give back to the community". Almost one quarter of interviewees (23.8%) cited reasons associated with fitness and exercise. Many other reasons were given but none of these totalled more than 1%. We next evaluated negative aspects of belonging to voluntary groups. Notably, many interviewees were unable to think of many (if any) negative aspects about their activities.

Table 36: Worst Aspects of Activities
(N=206)

People	Time	Other
28.1%	12.1%	25.7%

The worst single factor for 28.1% of the respondents related to adverse interactions with other members of the club. In all categories of voluntary groups a frequently cited item related to "complaining people". Unsportsmanlike behaviour was one of the common complaints from members of sporting clubs. The only other substantial negative category was related to time commitment (12.1%). Some talked of not having enough time to do all the things they wanted to do; others complained about activities being scheduled at inappropriate times; or running for too long. A large range of minor items totalled 25.7% of responses. Some negative responses in fact could have categorised as positive; for example, one person claimed "Genealogy can become too absorbing. It drives me crazy at times".

Interviewees were asked to give an overall rating to the quality of their group activities by ticking one of six descriptions ranging from "all good all of the time" to "all poor most of the time". Responses are summarised in Table 37. Because the responses were heavily skewed towards the positive side, the two lowest scoring negative fields have been amalgamated.

Table 37: Enjoyment of Activities
(N=206)

All good all of the time	All good most of the time	Some good most of the time	Some good some of the time	All or mostly poor
29.6%	56.7%	11.3%	2.0%	0.5%

The large majority of the 206 interviewees get considerable enjoyment from their voluntary group involvement; 86.3% described their activities as all good all of the time, or most of the time. Only one person claimed the activities were all poor. In qualifying their responses, some respondents expressed the sentiment that the benefit from group membership is dependent on an individual's input. Some also stated that they enjoyed some aspects of group activities more than others, or that some things were a problem one week but were sorted out the following week.

4.2.12 Need For Other Activities

Interviewees were also asked whether there were groups or activities which they would have liked to have joined, but which did not exist. If such a situation existed they could tick one or more of the five major categories of groups given in this study, or an "other" category if appropriate, and were asked to explain their choice. Responses are summarised in Table 38.

Table 38: Activities Not Already Catered For
(N=206)

No Activity	Physical	Social	Voluntary	Educational	Skill
83.2%	4.5%	7.0%	1.0%	4.5%	2.5%

Over eighty-three per cent (83.2%) of interviewees stated that there were no activities they would like to do that were not already catered for. None of the specific "yes" categories rated highly. Generally, belongers are satisfied with the range of clubs and activities presently available.

4.2.13 Self-Rated Health and Group Involvement

Table 39 shows the relationship between major group categories and self-rated health. (This table should be compared with the earlier Table 23 which indicated that health status never or hardly ever affected members' ability to get to groups or activities.)

Table 39: Categories of Clubs and Health Rating
(N=202)

	Excellent (n=26)	Very Good (n=54)	Good (n=73)	Fair and Poor (n=49)
Intellectual	23.1%	22.2%	25.7%	18.0%
Sporting	23.1%	48.1%	37.8%	38.0%
Helping	42.3%	44.4%	32.4%	32.0%
Social	30.8%	55.6%	55.4%	66.0%
Hobby	46.1%	27.8%	23.0%	22.0%

Because individual members could belong to any number of different types of groups neither columns nor rows are additive.

Participants who rated themselves as being in fair or poor health belonged mainly to social clubs (66%), although a surprisingly high (38%) of this group belonged to groups with a sporting/exercise focus. Some of this participation might have resulted from a wish to improve their health status. Of those who rated their health as excellent or very good, the greatest proportions were involved with hobby, social, sporting or helping groups.

4.2.14 Transport Difficulties

Interviewees were asked to indicate whether there were any transport problems which stopped them getting to some groups or activities. Again these responses can be compared with those in Table 23 and are broadly similar. Responses are broken down by age and gender and are shown in Table 40.

Table 40: Age Range and Gender by Transport Difficulties
(N=205)

	Never	Hardly Ever	Sometimes	A Little	All the Time	Depends on Circumstances
Total (N=205)	55.6%	12.7%	12.7%	2.4%	13.7%	2.9%
50-59 Years (n=13)	69.2%	23.1%	7.7%	0.0%	0.0%	0.0%
60-69 Years (n=84)	51.1%	11.9%	14.3%	2.4%	10.7%	3.6%
70-79 Years (n=88)	59.1%	9.1%	10.2%	1.1%	17%	3.4%
80 plus Years (n=20)	25.0%	25.0%	20.0%	10.0%	20.0%	0.0%
Female (n=145)	53.8%	11.0%	16.6%	3.4%	11.3%	3.4%
Male (n=60)	60.0%	16.7%	3.3%	0.0%	18.3%	1.7%

Some reasons for transport problems included the sharing of a car with a spouse; not having a car; inability to drive and poor public transport. Some respondents expressed fear at being out at night and especially if they had to rely on inadequate public transport to get home. (We note that many older females in particular, had not learnt to drive.) Taxis were too expensive for some. The notion of some sort of a community bus service was proposed by a few individuals.

The physical location of activities presented no problems for the majority (55.6%) of respondents. However, 13.7% always experienced transport difficulties which hindered, and frequently prevented, their participating in some voluntary group activities. For example, a number of the clubs which we visited were not easily accessible by public transport. Transport problems were greatest for the old-old group, possibly reflecting the fact that they were unable to drive. Notable, however, was the indication that most belongers in the 80 and older age range had little difficulties with transportation. A useful extension of these data would be a survey of non-belongers in the old-old age ranges to determine whether their lack of participation was associated with transportation difficulties.

4.2.15 Life Changing Events

Respondents were asked to indicate whether any major changes in their life situation had affected their capacity to take part in groups or activities. Of those who answered this question the majority (64.4%) did not list any such changes. However, 35.6% listed a major life-altering situation such as a significant health problem, the death of a spouse, or retirement. These life-altering situations were not always seen to be negative in effect. Some who were previously restricted by work commitments or the necessity of caring for a sick spouse subsequently found themselves free to pursue a greater number of outside activities. On the other hand, some found themselves restricted by such age-related illnesses as arthritis and heart conditions.

Table 41: Age Ranges and Life Changing Events
(N=177)

	No	Yes
50 - 59 years (n = 13)	100.0%	0.0%
60 - 69 years (n = 73)	58.9%	41.1%
70 - 79 years (n = 75)	64.0%	36.0%
80 years plus (n = 16)	62.5%	37.5%

Those in the 50-59 year age group reported no major changes in life conditions. The other three age groups vary little in their responses with about 60% of each group reporting no life changes or about 40% of each having experienced major life changes. That is, major life changes are more common after age sixty.

4.2.16 Preparedness for Activities

Participants were asked to rate on a five category scale how well prepared they were for activities at this stage of their lives. Responses are summarised in Table 42.

Table 42: Level of Preparedness for Activities
(N = 201)

	Very Well	Fairly Well	Average	Not Well	Didn't Bother
Total (N=201)	41.3%	35.8%	10.4%	8.5%	4.0%
Female (n=141)	42.6%	34.8%	10.6%	7.1%	5.0%
Male (n=60)	38.3%	38.3%	10.0%	11.7%	1.7%
50-59 Years (n=13)	30.8%	46.2%	15.4%	0.0%	7.7%
60-69 years (n=84)	40.5%	36.9%	8.3%	9.5%	4.8%
70 79 Years (n=85)	42.4%	34.1%	10.6%	9.4%	3.5%
80 Years plus (n=19)	47.4%	31.6%	15.8%	5.3%	0.0%

All age groupings indicated a relatively high level of preparedness. Of the 201 participants who responded to this question, 77.1% felt they were fairly well or very well prepared for activities at this stage of life. Only 8.6% stated that they were not well prepared. It seems that the people who participate in group activities did not find retirement a total "about face" in life but merely a change in direction. They appear to have thought about how they could make good use of their leisure time. Several respondents suggested that retirement provided the opportunity to devote more time and effort to activities in which they had always been interested and involved. Not "thinking about it" and "not realising the need for activities in retirement" were some issues cited by those who made up the 12.6% who indicated they were not well prepared.

Although males and females were comparatively equal in the positive aspects of preparedness, a larger proportion of the males (11.7%) were of the opinion that they were not well prepared for retirement compared to females (7.1%). This pattern may be the result of preoccupation with work activities prior to retirement.

5.0 SUMMARY

In summary, our study set out to investigate the characteristics of individuals and the types of voluntary groups they joined after retirement. We theorised that non-restrictive voluntary organisations could be categorised into five basic types: those with intellectually challenging activities; those which catered for sport and exercise; those with an emphasis on helping others; those with social contact as their main purpose; and those which specialised in hobbies and crafts. We found that age cohort, gender, and educational level were often associated with the type of voluntary groups which seniors preferred to join. In many cases, members had retired from the paid labour market to take up what was virtually a part-time but unpaid job. For the greater part, voluntary group membership was an important focus in the lives of seniors which were little affected by health, mobility, or transport issues. Particularly for seniors who lived alone, voluntary group membership was an important quality of life issue. Irrespective of the central focus of the voluntary group, social contact was stated to be a very important reason for belonging by a large proportion of interviewees. Finally, interviews with a number of club organisers suggest that there is an emerging need for new types of organisations and organisational activity to cater for newer cohorts with different interests and expectations.

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APPENDIX 1

ADDITIONAL INFORMATION ABOUT MEMBERSHIP OF MULTIPLE VOLUNTARY GROUPS

Chart A1 Intellectual Groups - Membership by Gender

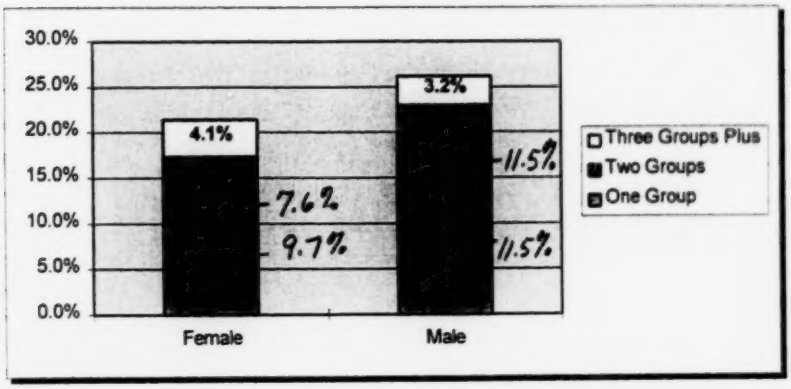

Chart A2 Sporting Clubs - Membership by Gender

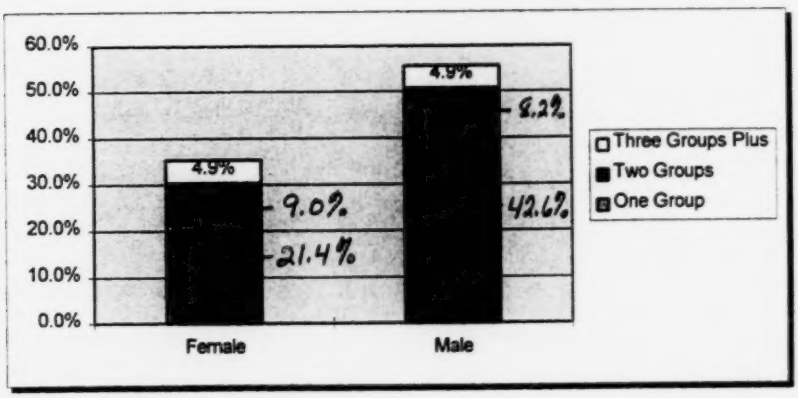

Chart A3 Helping Groups - Membership by Gender

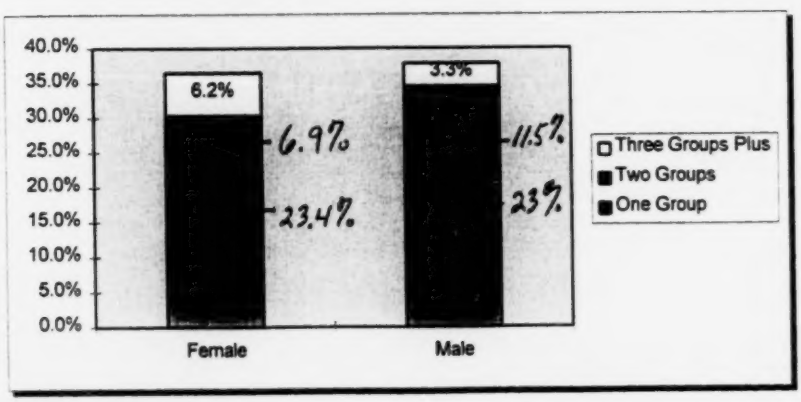

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Chart A4 Social Groups - Membership by Gender

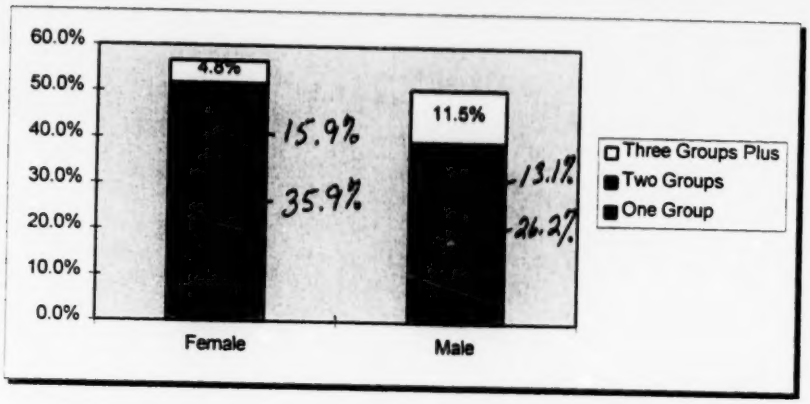

Chart A5 Hobby and Craft Groups - Membership by Gender

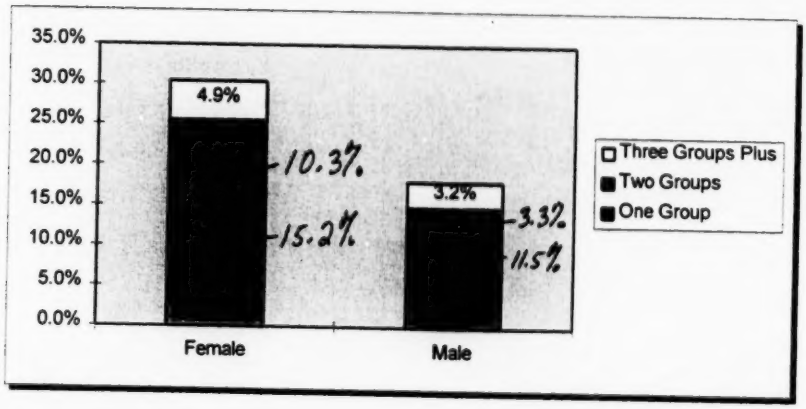

Chart A6: Intellectual Groups - Membership by Age Distribution

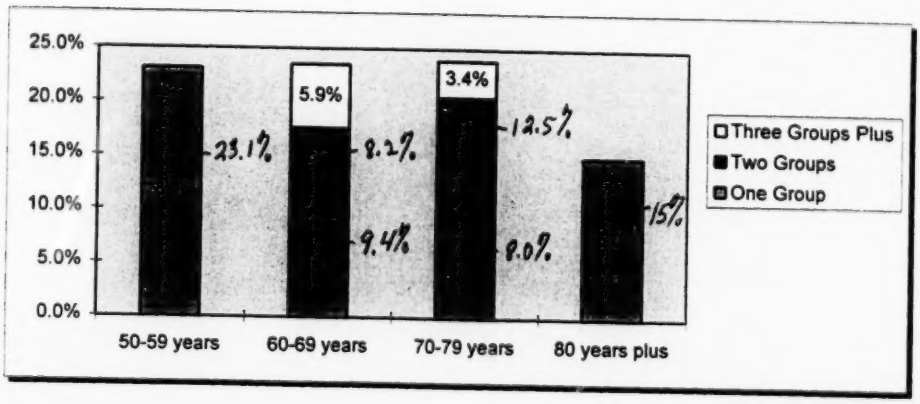

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Chart A7 Sporting Groups - Membership by Age Distribution

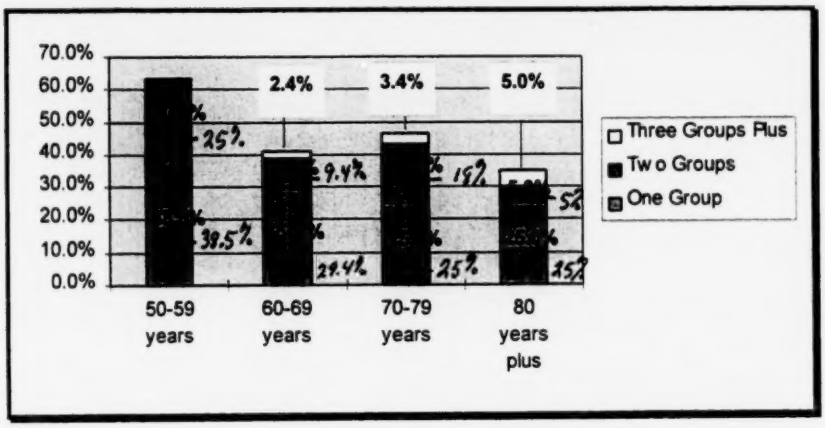

Chart A8: Helping Groups - Membership by Age Distribution

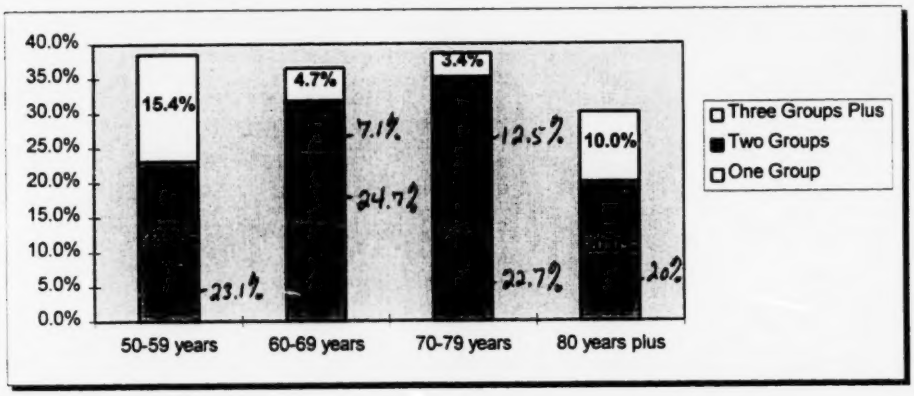

Chart A9: Hobby Groups - Membership by Age Distribution

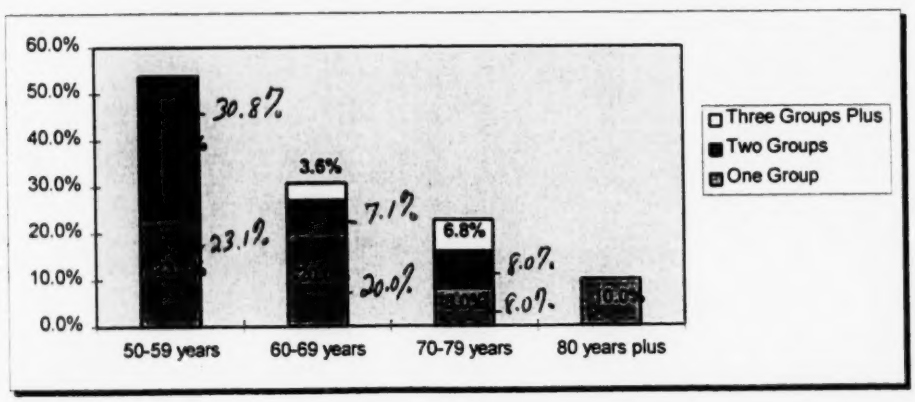

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Chart A10: Social Groups - Membership by Age Distribution

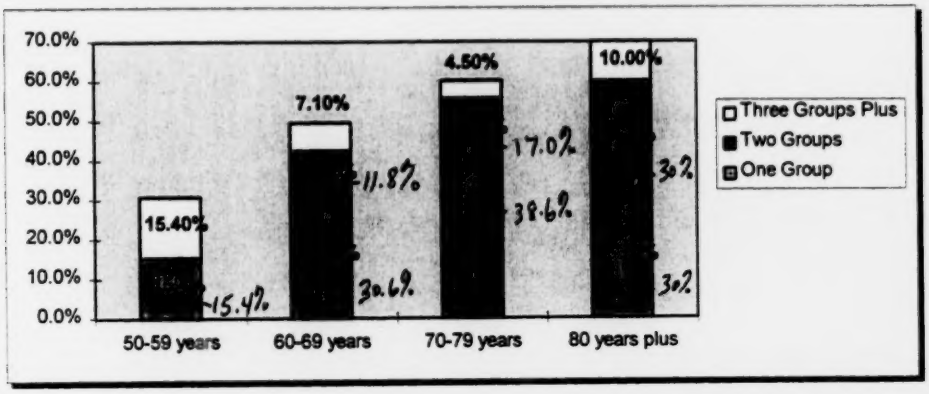


Chart A11: Occupation History and Helping Groups

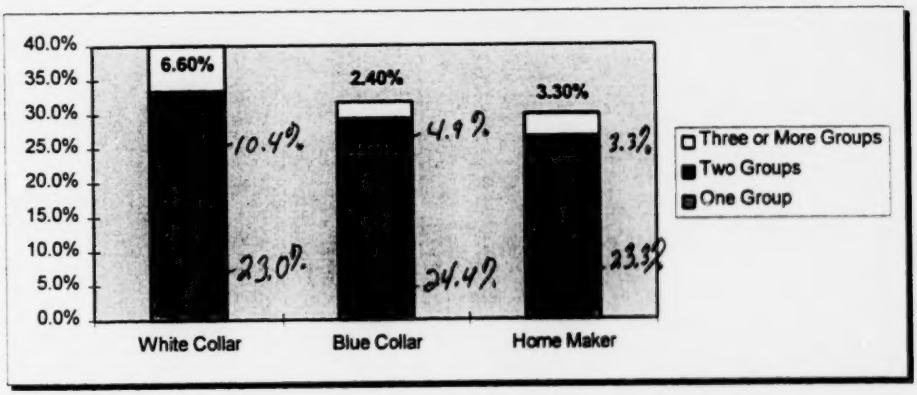


Chart A12: Occupation History and Social Groups

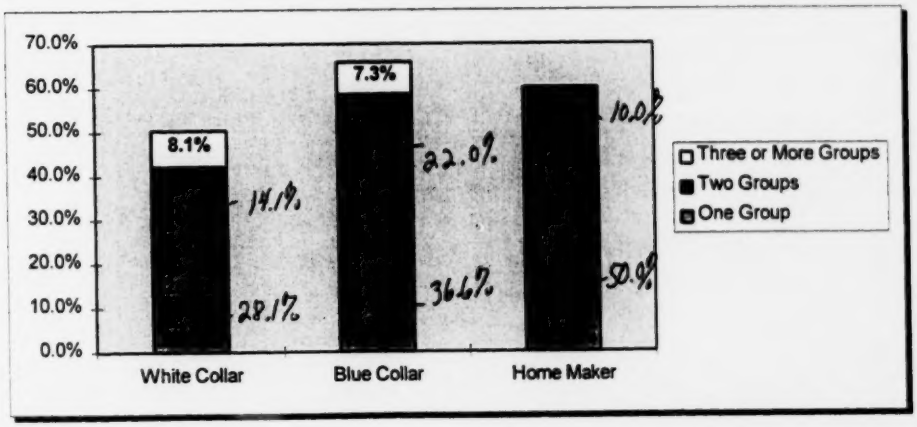
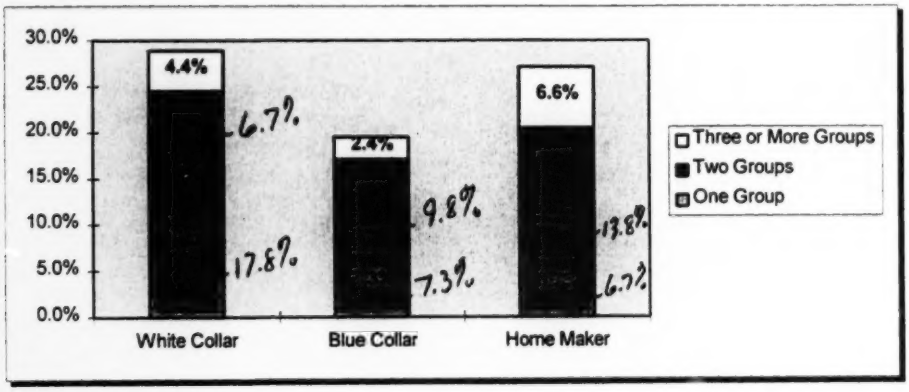


Chart A13: Occupation History and Hobby Groups



APPENDIX 2

SURVEY INSTRUMENT

Organisation _____

Main activity _____

CONFIDENTIAL QUESTIONNAIRE

Group and Activity Participation By Senior Australians Survey

1. How many different unpaid social or community groups and organisations are you involved in?

1	2	3	4 - 5	6 or more

2. Details of Present Groups / activities

Name of Group or Activity?	How long a member?	Why did you choose this Group or activity?	Exactly what tasks and activities do you get involved with?

3. About how many hours, on average, are you involved in these activities / groups each week / month

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Week 1							
Week 2							
Week 3							
Week 4							
Week 5							
Other (Please describe)	.....						

4. List the three best things about these activities

.....

.....

.....

5. List the three worst things about these activities

.....

.....

.....

6. How would you describe the quality of your group activities?

all good all of the time	all good most of the time	some good most the time	some good some the time	most poor most the time	all poor all of the time

Please describe .....

.....

.....

.....

.....

7. Are there groups or activities you would like to join, but which <u>don't exist</u>?

No	Yes sporting / physical	Yes social activity	Yes voluntary work	Yes educational activity	Yes skill development	Yes other

Please explain .....

.....

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.....

8. Are there any activities / groups you have <u>given up</u>?

	Name of Group or activity	Main reasons for joining Group or activity	Main reasons for giving up
a) as a child			
b) as a younger adult (17-30)			
c) mid-life (30-45)			
d) more recently			

9. Are there any groups / activities you wish you had started before you had retired, but didn't?

.....

.....

.....

10. How well prepared were you for <u>activities</u> at this stage of your life?

very well prepared	fairly well prepared	about average	not too well	didn't bother preparing	other

please explain with reference to **your groups or activities** .....

.....

.....

.....

11. Does the <u>physical location</u> of groups / activities affect your involvement in any way?

No	Yes

If yes,

public transport	building design	parking problems	taxi expense	other

please describe .....

.....

.....

12. Do you have any <u>health</u> problems which affect you getting to groups or activities?

No	Yes

If yes,

All of the time	most of the time	some of the time	hardly ever	it depends on what I do or how I do it	other

please describe .....

.....

.....

13. a) How would you rate your overall health at the present time?

excellent	very good	good	fair	poor	don't know

please explain .....

.....

.....

.....

.....

b) Would you say that your health is better, about the same, or worse than most people your age?

better	sometimes better	same	sometimes worse	worse	don't know

please explain .....

.....

.....

.....

.....

.....

c) Does your health affect what you do?

a lot	a little	occasionally	not really	not at all	don't know

please explain .....

.....

.....

.....

.....

14. Do you have any <u>transport</u> problems which stop you getting to some groups or activities you like?

all of the time	most of the time	some of the time	hardly ever	never	it depends on what I do or how I do it	other

please describe .....

.....

.....

.....

15. How easily can you do the following things?

	easily	with difficulty	with help	if I take my time	I can't do it	I don't need to
shopping						
house cleaning						
washing up						
minor house repairs						
light gardening						
heavy gardening						
lawn mowing						
wash car						

16. Here is a list of common leisure, recreational and group activities. Please tick whatever, on average, applies to you.

	A lot every day	A little every day	At least weekly	At least monthly	Rarely	Never
Visiting or having visitors						
Reading						
Going out e.g. to meals, to watch sport						
Exercise, e.g. swim, walk etc.						
Doing a hobby e.g. craft, cards etc.						
Watching TV						
Playing Bingo						
Helping friends or neighbours						
Going to church						
Learning something new or developing a skill						

17. What is the highest level of <u>formal</u> education you completed?

primary school	2 years high school	finished high school	trade certificate	Assoc diploma or equivalent	degree	other

please explain .....

.....

18. Do you

live alone in house	live alone in unit/flat/ villa	live with spouse or friend	live with family	live in a retirement village	live in supportive accommodation	other

please explain .....

.....

19. Has there been a major change in your life situation that affects your capacity to take part in groups or activities?

Please describe .....

.....

.....

.....

20. a) What is or was your occupation?

.....

.....

.....

b) What is or was your spouse's occupation, (if relevant)?

.....

.....

.....

21. What is your age group?

50 - 59	60 - 69	70 - 79	80 +

22. Are you?

male	female

23. Is there anything else that you think is important about groups and activities for Senior Australians?

.....

.....

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Please reverse staple this to the questionnaire
Insert the same code number as on the questionna

Code number

CONFIDENTIAL QUESTIONNAIRE
RESEARCH ASSISTANT CHECK LIST ONLY

Research Assistant .....

Date of visit .....

Physical Mobility

Hearing impairment	visual impairment	wheel chair	use of cane or other aid	crippled hands or legs	tremor (hands at rest)	other physical problem

Other Difficulties

Coughs continually	shortness of breath	skin problems	speech problems (not language)	unsure of self	some confusion	garrulous

Housing Type

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Other Comments

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